

Se

STALWARTS WORLD SCHOOL (A HI-TECH GURUKUL) OPP ESCORTS HOSPITAL, VERKA BYE-PASS, AMRITSAR (AFFILIATED TO CBSE, New Delhi)

Phone No: 9878462482 Stalwartsworld1631055@gn

Affiliation no: 1631055

School Code: 25871

SCHOOL LEAVING/TRANSFER CERTIFICATE

| 1. Name of the pupil: | | | | Admission no | 793 |
|--------------------------|--|--|--|--------------|------------|
| | Vanika . | Sharm | • | | |
| 2. A) Father's name: _ | A STATE OF THE PARTY OF THE PAR | THE RESERVE AND ADDRESS OF THE PARTY OF THE | | | W. Comment |
| b) Mother's name | ACRESS OF A STREET AND A STREET | COLUMN SPECIAL | ATT ANY TIMES | | |
| c) Father/Guardia | STATE OF THE PARTY | | | | 3 |
| 3. Nationality: 9 | ndian | | | | |
| 4. Whether the candi | date belongs to Sch | edule caste | or Schedule Trib | e: No | |
| 5. Date of first admiss | ion to the school w | ith class: | 25-01-2018 | 3 - Seco | nd |
| 6. Date of birth accord | ling to admission re | gister | | | |
| (in Fig): 20-9-2 | 11 In Word | s: Twent | y NEepten | bet Twi | Thousand |
| 7. Class in which stude | ent the pupil last st | udied(in fig) | T' | | |
| 8. School Board Annua | | | CARTES AND | E | |
| 9. Whether failed, if so | once/twice in san | ne class: | - | - | |
| 10. Subject Studied: | 1 Englis | h | 2. Hindi | 3 | rinjaloi |
| | 4. Mathe | | 5. EVS | 6 | emputer |
| 11. Whether qualified f | or promotion to hip | ther class:_ | | | |
| If so, to which class | | | In words: | | |
| 12. Month up to which | the (Pupil has paid) | school due | paid: Marc | h 2.019 | |
| 13. Any fee concession | availed of: if so, the | nature of s | uch concession: | | |
| 14. Total no of working | Charles and the Control of the Contr | | | | |
| 15. Total no of working | | | | | |
| 16. Games played or o | DESCRIPTION OF THE PROPERTY OF | | | | mention |
| achievement level t | | | idmintton | 1 | |
| 17. General conduct: | | | 10 | | - |
| 8. Date of Application | | | | | |
| 9. Date of Issue of Cert | [6] P. W. Differ, M. Statistics, pp. 1017. [7] A. M. M. March, Phys. Rev. B 501. | | 9 | | |
| O. Reason of leaving_ | Lugrated | | ther dist | * | |
| 1. Any other remarks: | -No- | - | | | |

Signature of Class teacher

checked by State full name and designation Principal